

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>		69055	1-24-01
<b>O.I.P.E. CLASSIFIER</b>	SW	52	1-25-01
<b>FORMALITY REVIEW</b>		69055	1-24-01
<b>RESPONSE FORMALITY REVIEW</b>	CG	69055	3-19-01

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	2/1/01
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If more than 150 claims or 10 actions  
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